

Application for a New Georgia IRP Account

SECTION 1 Before completing this application please read all of the instructions on page #2 of this form or click on the links to see specific instructions. Except for the signature, type, legibly handprint or complete on-line & print for submission by mail or in-person.

| | |
|---|---------------------------|
| (1) Registrant's/Carrier's Full, Legal Name & Business Address in Georgia including city, state & zip code. If the Registrant/Carrier is an individual, record first name, middle name & last name. A post office box is not acceptable. | (1a) Georgia County Name: |
| | |

(2) Registrant's/Carrier's Mailing Address, including city, state & zip code if different from the business address recorded above in #1. A post office box is acceptable.

| | | | |
|--|--|--|--|
| (3) Registrant's/Carrier's Business Telephone # including area code: | (3a) Registrant's /Carrier's Cell Phone # including area code: | (3b) Registrant's/Carrier's Fax # including area code: | (3c) Registrant's/Carrier's Internet E-mail Address: |
| (4) Contact Person's Name: | (4a) Contact Person's Telephone # including area code: | (4b) Contact Person's Fax # including area code: | (4c) Contact Person's Internet E-mail Address: |
| | | | |

| | |
|--|--|
| (5) Wyoming Intrastate? <input type="checkbox"/> Yes <input type="checkbox"/> No | (6) Federal Employer Identification # (FEIN) or Social Security #: |
| | |

FOR GEORIGIA IRP USE ONLY

Verification of a telephone listing for the Registrant/Carrier or d/b/a listed:
☐ Web (MCMIS) ☐ Directory Assistance ☐ Telephone Bill

SECTION 2

(1) How were your vehicle(s) last registered or how are they currently registered? If you are registering vehicles for the first time, check box (1a). If you check box 1b or 1c, please record the license plate number(s). If you check box 1d or 1e, please record the license plate number(s) and the issuing state or government authority. Attach additional sheets if necessary.

☐ (1a) I am registering vehicles that I have never registered before.

☐ (1b) Georgia Intrastate License Plate(s) - License Plate # _____

☐ (1c) Georgia IRP License Plate(s) - License Plate #: _____

☐ (1d) Out-of-State License Plate(s) - License Plate # & State of Issue: _____

☐ (1e) Other - License Plate # & Name of Issuing Government Authority: _____

(2) Have any vehicles been IRP registered under this name or another account or name? ☐ No ☐ Yes If "yes", please record the name on each account and the jurisdiction.

(3) Are your vehicle(s) currently leased to a lessee-carrier? ☐ No ☐ Yes If yes, record the name and address of the lessee-carrier:

(4) Has any licensing service, remittance agency, trucking service agency, consultant, or other individual(s) assisted you in the preparation of your IRP application? ☐ No ☐ Yes If yes, record the name(s) & addresses of the individual(s) or agent(s) who assisted you.

(5) Have you ever reported estimated mileage to any jurisdiction where you are recording estimated mileage on the Mileage Schedule B (Form T-139)?

☐ No ☐ Yes

(6) If you currently have apportioned license plate(s), or if you have had apportioned license plate(s) in the past, please explain why estimated mileage is being recorded on the Mileage Schedule B (Form T-139) instead of actual mileage:

(7) Are you currently under a registration suspension? ☐ No ☐ Yes

SECTION 3

(1) Under penalty of perjury, I hereby certify that I am the Registrant/Carrier or I am authorized to sign for the above named Registrant/Carrier. I further certify that the information shown on this application and on all attached documents is complete and correct:

| | | | |
|----------------------|-------------------------|----------------------------------|-----------------|
| _____ (Signature) | _____ (Printed Name) | _____ (Position or Job Title) | _____ (Date) |
|----------------------|-------------------------|----------------------------------|-----------------|

Important: Do not send money with this application. You will be billed later. Application for IRP registration can be made by mail or in-person.

Instructions for Completing Schedule G (Form T-239) – Application for a New Georgia IRP Account

Except for the signature, type, legibly handprint or complete on-line and print. Vehicle Schedule A (Form T-138) and Mileage Schedule B (Form T-139) must accompany this application. IRP registration cannot be completed nor can the fees be calculated until all of the required information is received. The numbers in parentheses () on page one (1) of this application correspond to the paragraphs below.

SECTION 1

1. [Registrant's/Carrier's Full, Legal Name & Business Address in Georgia including city, state & zip code. If Registrant/Carrier is an individual, record first name, middle name & last name. A post office box is not acceptable:](#) Record the Registrant's/Carrier's complete legal name and business address in Georgia including the city, state and the zip code. Please do not abbreviate the city. This address is the same address where the operational records and mileage records for the fleet are maintained. Plates will be mailed to the business address.
[1a. Georgia County Name:](#) Record the name of the county in Georgia where the Registrant's/Carrier's business address is located.
2. [Registrant's/Carrier's Mailing Address, including city, state & zip code if different from the business address recorded above in #1. A post office box is acceptable.](#) The Registrant's/Carrier's complete mailing address should be shown when different from the business address shown in #1. Plates will not be mailed to the mailing address.
3. [Registrant's/Carrier's Business Telephone # including area code:](#) A publicly listed business telephone number is required.
[3a. Registrant's/ Carrier's Cell Phone # including area code:](#) Optional
[3b. Registrant's/Carrier's Fax # including area code:](#) Optional
[3c. Registrant's/Carrier's Internet E-mail address:](#) Optional
4. [Contact Person's Name:](#) Record the complete name of the person to contact regarding this application. This person must be authorized to answer questions on this application. A [power of attorney](#) may be necessary.
[4a. Contact Person's Telephone # including area code:](#) If a contact person is named, the contact person's telephone number including the area code is required.
[4b. Contact Person's Fax # including area code:](#) Optional
[4c. Contact Person's Internet E-mail Address:](#) Optional
5. [Wyoming Intrastate?](#) Check the "Yes" box if the vehicles in this fleet will operate intrastate in the state of Wyoming during this registration year.
6. [Federal Employer Identification # \(FEIN\) or Social Security #:](#) Record the Registrant's Federal Employer Identification Number (FEIN). If the Registrant does not have a FEIN, record the Registrant's social security number and apply for a FEIN immediately with the [Internal Revenue Service \(IRS\)](#). Click on the link to connect to the IRS website.

SECTION 2

1. [How were your vehicle\(s\) last registered or how are they currently registered?](#) Check the box that indicates how your vehicles were last registered or how they are currently registered. Attach additional sheets if necessary:
[1a. I am registering vehicle\(s\) that I have never registered before:](#) If you registering vehicle(s) that have never been registered before, check box (1a).
[1b. Georgia Intrastate License Plate\(s\):](#) If the vehicle(s) you are registering are or have been registered in Georgia for intrastate travel, check box (1b) and record the Georgia license plate number(s).
[1c. Georgia IRP License Plate\(s\):](#) If the vehicle(s) you are registering are or have been registered in Georgia under IRP, checkbox (1c) and record the Georgia IRP license plate number(s).
[1d. Out-of-State License Plate\(s\):](#) If the vehicle(s) you are registering are or have been registered by another state, check box (1d), and record the license plate number(s) and the issuing state.
[1e. Other:](#) If the vehicle(s) you are registering are or have been registered by another government authority, check box (1e) and record the license plate number(s) and the issuing government authority.
2. [Have any vehicles been IRP registered under this name or under another account or name?](#) If any of your vehicle(s) have been registered under IRP under this name or under another name or account, check the "Yes" box and record the name on each account and the jurisdiction. If no vehicles have been IRP registered under this name or under another name or account, check the "No" box.
3. [Are your vehicle\(s\) currently leased to a lessee-carrier?](#) If your vehicle(s) are currently leased to a lessee-carrier, check the "Yes" box and record the name and address of the lessee-carrier.
4. [Has any licensing service, remittance agency, trucking service agency, consultant, or other individual\(s\) assisted you in the preparation of your IRP application?](#) If anyone has assisted you in the preparation of your IRP application, check the "Yes" box and record the name(s) and addresses of the individual(s) or agent(s). Persons assisting others for a fee with the registration of their vehicle(s) must register as a tag service company with the Tax Commissioner's office in the county in Georgia where the vehicle(s) are based. For additional information regarding tag service companies, contact your [County Tax Commissioner's office](#). If no one has assisted you in the preparation of your IRP application, check the "No" box.
5. [Have you ever reported estimated mileage to any jurisdiction where you are recording estimated mileage on the Mileage Schedule B \(Form T-139\)?](#) If you have reported estimated mileage in the past to any jurisdiction(s) where you are recording estimated mileage on the Mileage Schedule B (Form T-139), check the "Yes" box and explain why you are again estimating mileage instead of recording actual mileage. If you have never reported estimated mileage to these jurisdictions, check the "No" box.
6. [If you currently have apportioned license plate\(s\) or if you have had apportioned license plate\(s\) in the past, please explain why estimated mileage is being recorded on the Mileage Schedule B \(Form-139\) instead of actual mileage:](#) If you are recording actual mileage, skip this question.
7. [Are you currently under a registration suspension?](#) If your license plate registration(s) are currently suspended, check the "Yes" box. If they are not suspended, check the "No" box.

SECTION 3

1. [Signature, Printed Name, Position or Job Title & Date:](#) The Registrant/Carrier or an authorized agent is required to sign this completed application, print their name, record their position or job title with the company, and enter the date (month, day and year) they sign the application.

Do not submit money with this application. You will be billed later. Application for Georgia IRP registration may be submitted by mail or in-person as follows:

Mailing Address: **ATTN: IRP Unit**, Department of Revenue, Motor Vehicle Division, PO Box 16909, ATLANTA, GA 30321

In-Person Address: Department of Revenue, Motor Vehicle Division, 1200 Tradeport Blvd., Hapeville, GA 30354 - Open from 8:00 a.m. to 4:30 p.m. Monday through Friday excluding state holidays.

Telephone Number: (404) 675-6135

Website: www.dor.ga.gov This application can be completed and printed from the Department's website for signing and submission by mail or in-person.



Georgia Department of Revenue

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1800 Century Center Blvd., N. E.
Atlanta, Georgia 30345 - 3205



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Services by Region

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Georgia Unclaimed Refunds



Click here to review the state of Georgia list for Unclaimed Refund checks for the years 2002 - 2003.



Georgia Tax Delinquent List

The names of various taxpayers who owe delinquent taxes will be published periodically through this Website, as authorized by law. Please see the next page for more details. **Updated June 2005**